

Service Requirements

1. Only those EIBI services described in the PDD Manual and the approved waiver document will be reimbursable using PDD funds.
2. Medicaid reimbursement is made only for direct services. The costs associated with travel and travel time are not allowed.
3. All EIBI interventions funded through the PDD Program must be directly related to the child's therapeutic goals that are based on the child's diagnosis of PDD to include autism, Asperger's Syndrome and PDD-NOS. The EIBI Provider must have sufficient documentation to clearly define progress made / lack of progress and the reasons why, for each waiver participant. Documentation must be conclusive and detailed. The absence of such documentation could result in recoupment. The Medicaid Agency is the final authority for such determinations.
4. EIBI services or Case Management services rendered during a time when a waiver participant's Level of Care Determination has expired or is otherwise invalid are not reimbursable by the Medicaid Agency.
5. EIBI services or Case Management services rendered prior to the development of an approved PDD waiver Plan of Service, provided when a Plan of Service has expired or provided when the EIBI service is not listed as a need on the waiver Plan of Service, are not reimbursable by the Medicaid Agency.
6. This waiver will permit behaviorally-based therapy models consistent with best practices that are research based and peer reviewed.
7. The EIBI service is limited to children who have been diagnosed with a Pervasive Developmental Disorder as defined in the most recent addition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association and who meet the ICF-ID level of care criteria. In order to accept a qualified diagnosis from a licensed or certified diagnostician there must be conclusive written documentation in the child's file which provides a detailed report of the assessments and evaluations leading to the diagnosis, the diagnostic tools used to reach the diagnosis, and any other narrative, tests, and medical reports used by the diagnostician to render his/her diagnosis of the child.
8. EIBI services for children are limited to three years of enrollment or upon reaching their eleventh birthday; whichever comes first.
9. Waiver applicants will be admitted to the waiver after they meet all criteria for enrollment contingent upon available funding and waiver slots. If there are not sufficient slots for all applicants, applicants will be admitted based upon the date of their application.

10. The annual cost of benefits per child shall not exceed \$50,000 or available funds, whichever is less.
11. The level of service (i.e. the number of hours per week) each child receives is based on a DDSN review of relevant assessments, documentation and instructional environments. The agency will make the final determination on the number of service hours each child receives. However, if a child's condition changes (e.g. no progress being made, new aberrant behavior is noted) and is supported by documentation, the Case Manager can submit a request for an increase in service hours, not to exceed the maximum service limits specified in the PDD Waiver.
12. Children will receive no more than eight hours of line therapy per day.
13. Therapy hours that are missed during a week shall not "roll over" or be carried forward as a balance to be used the following week or at any time in the future.
14. Services may be delivered in the child's relevant natural environments which may include but are not limited to the child's home or community locations directly related to the child's therapeutic goals. Delivery of these services may be deemed appropriate by the child's team based on the child's strengths and challenges. However, at no time can a child receive EIBI services in any educational setting (e.g. public school, private school, home school or other educational setting) where educational services are being simultaneously provided to the child during identified school hours.
15. The therapeutic goals must be implemented on a face-to-face basis with the child. Parents or guardians are required to be present at team meetings and workshop sessions and must be trained in all therapeutic procedures and be active contributors to their child's program to carry over and reinforce targeted behaviors and skill learning. Some EIBI Providers may require that a parent or responsible party be on site during therapy sessions.
16. Once children have had three years of intensive services, or at such time that they are not making progress towards identified goals, recommendations will be made to other home and community based services. There may be circumstances that prevent immediate receipt of these services (e.g. waiting lists or unavailability of funds).
17. The use of PDD waiver services is exclusive of the other home and community-based waiver services. Children can participate in only one South Carolina home and community based Medicaid waiver program at a time. Each waiver program managed by DDSN maintains a separate list and waiver slots are awarded based on the child's position on that service list.
18. In an effort to maximize utilization of dollars and serve more children:
 - Children in the PDD State Funded Program cannot receive other DDSN services (i.e. respite, summer service funds) or waivers.

- Children who meet Medicaid criteria will be expected to participate in the waiver if all other required criteria are met. No children who meet the Medicaid criteria can participate in the PDD State Funded Program, unless funding is available AND no waiver slots are available.
 - All participants in the PDD State Funded Program must be ruled ineligible for Medicaid or not meet ICF/ID Level of Care prior to receiving services through the PDD State Funded Program.
19. Parents/legal guardians reserve the right to choose their child's EIBI Provider. However, a change in service providers does not mean that additional Assessments will be authorized. Medicaid will not pay for additional Assessments. The Assessment component is only an annual service.
20. While family members/relatives can be hired as Line Therapists, state Medicaid Policy does not allow the following family members/relatives to be paid for providing care or services to Medicaid recipients under any circumstances:
- A parent of a minor Medicaid recipient
 - A step parent of a Medicaid recipient
 - A foster parent of a Medicaid recipient
 - Any other legally responsible guardian of a Medicaid recipient
21. EIBI Providers located outside of a 25-mile radius from the South Carolina border must comply with all procedures pertaining to the PDD Program. These specific Providers must implement the same level of service as an in-state provider.
22. EIBI Providers are explicitly prohibited from using restraints.